

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATEFOR THE MONTH OF April 2011 REDate: May 1, 2011CONTRACTOR: Hawaiian Building MaintenanceADDRESS: 1001 Bishop Street, Suite 955City, State ZIP: Honolulu, HI 96813Contract No. PC 58021 [✓]DAGS Job No. 12-20-2621PROJECT TITLE: Hawaii State Hospital Building A, C, E, F, G, H, I & L Various Improvements**CONTRACT**Basic Contract Amount \$ 474,000.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVITS
MONTHLY ESTIMATE CHECKLIST	
<input checked="" type="checkbox"/> CONTRACT NUMBER	<input checked="" type="checkbox"/> PROJECT NAME & LOCATION
<input checked="" type="checkbox"/> ALL SIGNATURES	

CHANGE ORDERSTotal \$ 22,003.00Adjusted Contract Amount \$ 496,003.00**WORK ACCOMPLISHED**

		Basic Contract	Change Order	Total
Completed to Date	100.00%	\$ <u>474,000.00</u>	100.00% \$ <u>22,003.00</u>	\$ <u>496,003.00</u>

Retained	REDUCED <input type="checkbox"/>	\$ <u>1,000.00</u> *	\$ <u>-</u>	\$ <u>1,000.00</u> *
Amount Subject to Payment		\$ <u>473,000.00</u>	\$ <u>22,003.00</u>	\$ <u>495,003.00</u>
Payments to Date		\$ <u>462,150.00</u>	\$ <u>8,028.00</u>	\$ <u>470,178.00</u>
		\$ <u>-470,178.00</u> PC	\$ <u>-</u> PC	
Payments Now Due		\$ <u>10,850.00</u>	\$ <u>13,975.00</u>	\$ <u>24,825.00</u>
		\$ <u>-2,822.00</u> PC	\$ <u>-22,803.00</u> PC	

Payment No. FINAL ☐ 5/4 RE

* Remarks: PUNCH LIST COMPLETED. PROJECT KEPT OPEN FOR USER REQUESTED CHANGE ORDER. CHANGE ORDER WORK DONE. CONTRACTOR SHOULD BE PAID FOR WORK DONE, WHILE CLOSING DOCUMENTS ASSEMBLED FOR CLOSING. RECOMMEND RETAINING ONLY \$1,000.

1. Computed and Checked by:

[Signature] 5/9/11
3. Recommended: Project Inspector or Engineer Date:

[Signature] 5/9/11
4. Recommended: Area Engineer/Architect Date:

[Signature] MAY 10 2011
5. Approved: Branch Chief or District Engineer Date:

The Public Works Administrator certifies that change orders have been issued and the work performed.

[Signature] MAY 11 2011
State Public Works Administrator Date:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

Hawaiian Building Maintenance
Name of Contractor

[Signature] 5/11/11
By signature / Title: Date:

Department of Accounting and General Services
Division of Public Works

For the Month of: April 2011 *g*

CONTRACTOR: Hawaiian Building Maintenance
PROJECT TITLE: Hawaii State Hospital Building A, C, E, F, G, H, I & L Vari

Contract No.: ~~C~~ 58021
DAGS Job No.: 12-20-2621

CLOSED	<u>PRIME CONTRACTOR</u>	<u>TRADE</u>	<u>LICENSE NO.</u>	<u>BASIC CONTRACT AMOUNT</u>	<u>COMPL. TO DATE</u>	<u>% CMPL</u>	<u>RETN %</u>	<u>CONTRACT AMOUNT RETAINED</u>
	Hawaiian Building Maintenance	General Contractor	BC-27276	\$468,000	\$468,000	100.00%	--0.0%--	--\$0--
							.2 %	+ \$1,000

	SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	SUB- CONTRACT AMOUNT RETAINED
	MVC Electrical	Electrical	C-25883	\$6,000	\$6,000	100.00%	0.0%	\$0
						#DIV/0!	0%	\$0
						#DIV/0!	0%	\$0
						#DIV/0!	0%	\$0
						#DIV/0!	0%	\$0
						#DIV/0!	0%	\$0
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						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
Total Retained from Subs								\$0

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$0
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I certify that the above retentions are correct for this request.


\$ 1,000

Hawaiian Building Maintenance

Checked/Verified by:

7

Initial - Project Inspector or Engineer

By Signature  Date 5/1/11

NOTE:

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 4

PROJECT TITLE: HAWAII STATE HOSPITAL - BUILDINGS A, C, E, F, G, H, I, & L,
VARIOUS IMPROVEMENTS

BILLING MONTH: April-11

DAGS JOB NO.: 1 2-20-2621

CONTRACT NO.: 58021

CONTRACTOR: HBM ACQUISITIONS, LLC

VENDOR CODE: 29892700

Original Contract Payment

Suffix: 3

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B08-406M	\$0.00	(\$10,850.00)	\$10,850.00
Totals:		\$0.00	(\$10,850.00)	\$10,850.00

Change Order Payment

Suffix: 4

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B08-406M	\$13,769.00	(\$206.00)	\$13,975.00
Totals:		\$13,769.00	(\$206.00)	\$13,975.00

Grand Total:

\$13,769.00

(\$11,056.00)

\$24,825.00

Lloyd Ogata
Verified By

5/12/2011
DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 29892700

Cost Code 3A1

Voucher No.

05117N38

Verified By

pro 5/18/11